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RESPONSE UNDER 37 C.F.R.  
§1.116 EXPEDITED PROCEDURE  
EXAMINING GROUP 2131

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**Applicants:** Rosario Gennaro, et al.

**Examiner:** Aravind K. Moorthy

**Serial No:** 09/734,102

**Art Unit:** 2131

**Filed:** December 11, 2000

**Docket:** YOR920000597US1 (13879)

**For:** ELECTRONIC CASH CONTROLLED  
BY NON-HOMOMORPHIC SIGNATURES

**Dated:** March 11, 2005

**Confirmation No:** 3899

Mailstop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT UNDER 37 C.F.R. §1.116**

Sir:

In response to the Office Action dated April 29, 2004, please amend the  
subject application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins  
on page 2 of this paper.

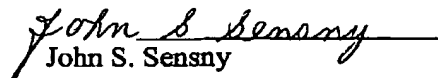
**Remarks** begin on page 7 of this paper.

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**CERTIFICATION OF FACSIMILE TRANSMISSION**

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**Dated:** March 11, 2005

  
John S. Sensny

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**SCULLY, SCOTT, MURPHY  
& PRESSER**

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<b>To:</b>	Examiner Aravind K. Moorthy	<b>From:</b>	John S. Sensny
<b>Fax:</b>	703-872-9306	<b>Pages:</b>	15 pages including cover sheet
<b>Phone:</b>		<b>Date:</b>	3/11/2005
<b>Re:</b>	U.S. Patent No: 09/734,102 Group Art Unit: 2131 Confirmation No: 3899 Docket No: yor920000597us1 (13879)	<b>CC:</b>	

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3. Amendment Under 37 C.F.R. §1.116
4. Authorization to charge deposit account

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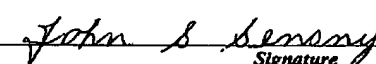
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<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			Docket No.
Applicant(s): <b>Rosario Gennaro, et al.</b>			<b>YOR920000597US1 (13879)</b>
Application No. <b>09/734,102</b>	Filing Date <b>December 11, 2000</b>	Examiner <b>Aravind K. Moorthy</b>	Group Art Unit <b>2131</b>
Invention: <b>ELECTRONIC CASH CONTROLLED BY NON-HOMOMORPHIC SIGNATURES</b>			
Confirmation No: <b>3899</b>			
<p>I hereby certify that this <u>AMENDMENT UNDER 37 C.F.R. §1.116</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>) on <u>March 11, 2005</u> (Date)</p> <p style="text-align: right;"><u>John S. Sensny</u> (Typed or Printed Name of Person Signing Certificate)  <u>John S. Sensny</u> (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

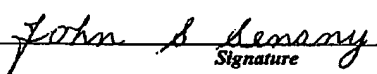
P18/REV02

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>YOR920000597US1 (13879)</b>	
Applicant(s): <b>Rosario Gennaro, et al.</b>						
Application No. <b>09/734,102</b>	Filing Date <b>December 11, 2000</b>	Examiner <b>Aravind K. Moorthy</b>	Customer No. <b>23389</b>	Group Art Unit <b>2131</b>	Confirmation No. <b>3899</b>	
Invention: <b>ELECTRONIC CASH CONTROLLED BY NON-HOMOMORPHIC SIGNATURES</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	13 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>50-0510/IBM</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 <b>John S. Sensny</b> Registration No. 28,757  <b>SCULLY, SCOTT, MURPHY &amp; PRESSER</b> 400 Garden City Plaza, Suite 300 Garden City, New York 11530 (516) 742-4343			Dated: <b>March 11, 2005</b>  <div style="border: 1px solid black; padding: 5px;">         I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____          _____          (Date)           _____          Signature of Person Mailing Correspondence           _____          Typed or Printed Name of Person Mailing Correspondence       </div>			
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P11LARGE/REV09

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>YOR920000597US1 (13879)</b>	
Applicant(s): <b>Rosario Gennaro, et al.</b>						
Application No. <b>09/734,102</b>	Filing Date <b>December 11, 2000</b>	Examiner <b>Aravind K. Moorthy</b>	Customer No. <b>23389</b>	Group Art Unit <b>2131</b>	Confirmation No. <b>3899</b>	
Invention: <b>ELECTRONIC CASH CONTROLLED BY NON-HOMOMORPHIC SIGNATURES</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
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TOTAL CLAIMS	13 -	20 =	0	x \$50.00	\$0.00	
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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>50-0510/TBM</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 <b>John S. Sensny</b> Registration No. 28,757			Dated: <b>March 11, 2005</b>			
<b>SCULLY, SCOTT, MURPHY &amp; PRESSER</b> 400 Garden City Plaza, Suite 300 Garden City, New York 11530 (516) 742-4343			<div style="border: 1px solid black; padding: 5px;">         I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____          _____          (Date)          _____          Signature of Person Mailing Correspondence          _____          Typed or Printed Name of Person Mailing Correspondence       </div>			
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